

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF

In re Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: March, 2017

Social Security # xxx-xx-1243  
(last 4 digits only)

MONTHLY OPERATING REPORT  
(INDIVIDUAL WAGE EARNERS)

File with the Court and submit a copy to the United States Trustee within 20 days after the end of the month and submit a copy of the report to any official committee appointed in the case.  
(Reports for Rochester and Buffalo Divisions of Western District of New York are due 15 days after the end of the month, as are the reports for Southern District of New York.)

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1 (INDV)	Yes	No
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CONT)	Yes	Yes
Copies of bank statements		Yes	Yes
Disbursement Journal	MOR-2 (INDV)	Yes	No
Balance Sheet	MOR-3 (INDV)	No	No
Copies of tax returns filed during reporting period		No	No
Summary of Unpaid Post-petition Debts	MOR-4 (INDV)	Yes	No
Status of Secured Notes, Leases, Installment Payments	MOR-5 (INDV)	No	No
Debtor Questionnaire	MOR-6 (INDV)	Yes	No

I declare under penalty of perjury (28 U.S.C. Section 1746) that the documents attached to this report are true and correct to the best of my knowledge and belief.

Signature of Debtor

*Nicholas V. Campanella*

Date

*6/1/17*

Signature of Joint Debtor

Date

In re Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: **xxx-xx-1243**

# INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS

(This Form must be submitted for each bank account maintained by the Debtor)

Amounts reported should be per the debtor's books, not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. Attach the bank statements and a detailed list of all disbursements made during the report period that includes the date, the check number, the payee, the transaction description, and the amount. A bank reconciliation must be attached for each account. [See MOR-I (CONT)]

	Current Month Actual	Cumulative Through Date Actual
<b>Cash - Beginning of Month</b>	\$ 97,729.92	
<b>RECEIPTS</b>		
Wages (Net)	\$ 10,538.18	\$108,983.74
Interest and Dividend Income	5.14	\$45.00
Alimony and Child Support		
Social Security and Pension Income		
Sale of Assets		
Other Income (attach schedule)	\$22,550.00	\$318,994.73
<b>Total Receipts</b>	\$ 33,093.32	\$428,023.47
<b>DISBURSEMENTS</b>		
<b>ORDINARY ITEMS:</b>		
Mortgage Payment(s)	\$7,465.79	\$67,051.61
Rental Payment(s)	\$200.00	\$1,885.00
Other Secured Note Payments	\$606.38	\$6,101.54
Utilities	\$1,170.66	\$9,380.39
Insurance		
Auto Expense		\$48.00
Lease Payments		
IRA Contributions		
Repairs and Maintenance		\$146.53
Medical Expenses		\$1,680.48
Food, Clothing, Hygiene	\$2,313.34	\$14,235.93
Charitable Contributions		\$15.00
Alimony and Child Support Payments		
Taxes - Real Estate		\$11,772.57
Taxes - Personal Property		
Taxes - Other (attach schedule)		\$80,000.00
Travel and Entertainment	\$574.48	\$7,768.16
Gifts		\$55,118.69
Other (attach schedule)	\$6,993.10	\$109,542.70
<b>Total Ordinary Disbursements</b>	\$19,323.75	\$364,746.60
<b>REORGANIZATION ITEMS:</b>		
Professional Fees		\$10,000.00
U. S. Trustee Fees		
Other Reorganization Expenses (attach schedule)		
<b>Total Reorganization Items</b>	\$ -	\$10,000.00
<b>Total Disbursements (Ordinary + Reorganization)</b>	\$ 19,323.75	\$374,746.60
<b>Net Cash Flow (Total Receipts - Total Disbursements)</b>	13,769.57	\$63,276.87

In re Nicholas V. Campanella

Case No. 16-21185-VFP

Debtor	Reporting Period: xxx-xx-1243
Cash - End of Month (Must equal reconciled bank statement)	\$ 111,499.49

**INDIVIDUAL DEBTOR CASH RECEIPTS AND CASH DISBURSEMENTS**  
(continuation sheet)

BREAKDOWN OF OTHER CATEGORY	Current Month Actual	Cumulative Filing to Date Actual
<b>Other Income</b>		
Legal order reversal		\$274.28
Legal order reversal		\$125.00
Bank transfer to close previous account		\$350.00
Medical Insurance Refund		\$153.77
Credit Card Activity		\$15,662.36
Rent belonging to MCN Properties - deposited by mistake		\$39,781.09
Phoenix Medical Director Fees for Dr. Campanella		\$47,506.41
Distribution from Montclair Physicians Group, LLC		\$97,050.00
Distribution from Affiliates	\$22,550.00	\$118,091.82
<b>Other Taxes</b>		
<b>Other Ordinary Disbursements</b>		
Gina Campanella - reimbursement of expenses		\$150.00
Gina Campanella - reimbursement of expenses		\$320.00
Credit Cards Payable	\$4,162.08	\$14,518.81
Repairs & Maintenance		\$365.27
Gina Campanella - Loan from Marie Campanella		\$40,000.00
Charitable Contributions		\$700.00
MCN Properties - Loan		\$30,000.00
Pilgrim Medical - Loan		\$9,000.00
Joseph Alfano - Loan Payments	\$2,831.02	\$14,155.10
<b>Other Reorganization Expenses</b>		

**THE FOLLOWING SECTION MUST BE COMPLETED**

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

<b>TOTAL DISBURSEMENTS</b>	\$19,144.06
LESS: TRANSFERS TO OTHER DEBTOR IN POSSESSION ACCOUNTS	
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	

In re Nicholas V. Campanella

Case No. 16-21185-VFP

Debtor

Reporting Period: **xxx-xx-1243**

TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES	\$19,144.06
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Case No. 16-21185-VFP  
Reporting Period: xxx-xx-1243

## CASH DISBURSEMENTS

### Total Cash Disbursements

### BANK ACCOUNT DISBURSEMENTS

### Total Bank Account Disbursements

Total Disbursements for the Month

Nicholas V. Campanella  
Debtor

Case No. 16-21185-VFP  
Reporting Period: xxx-xx-1243

### STATUS OF POSTPETITION TAXES

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.  
Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.  
Attach photocopies of any tax returns filed during the reporting period.

	Beginning Tax Liability	Amount Withheld or Accrued	Amount Paid	Date Paid	Check No. or EFT	Ending Tax Liability
<b>Federal</b>						
Withholding	\$0.00	\$3,284.80	\$3,284.80			\$0.00
FICA-Employee	\$0.00	\$1,224.00	\$1,224.00			\$0.00
FICA-Employer	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$0.00	\$0.00			\$0.00
Income	\$0.00	\$0.00	\$0.00			\$0.00
Other:						
Total Federal Taxes	\$0.00	\$4,508.80	\$4,508.80			\$0.00
<b>State and Local</b>						
Withholding	\$0.00	\$941.54	\$941.54			\$0.00
Sales	\$0.00	\$0.00	\$0.00			\$0.00
Excise	\$0.00	\$0.00	\$0.00			\$0.00
Unemployment	\$0.00	\$6.38	\$6.38			\$0.00
Real Property	\$0.00	\$0.00	\$0.00			\$0.00
Personal Property	\$0.00	\$0.00	\$0.00			\$0.00
Other: Disability and Family Leave (NJ)		\$5.10	\$5.10			
Total State and Local		\$953.02	\$953.02			
<b>Total Taxes</b>	<b>\$0.00</b>	<b>\$5,461.82</b>	<b>\$5,461.82</b>			<b>\$0.00</b>

### SUMMARY OF UNPAID POSTPETITION DEBTS

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 90	
Accounts Payable	0					0
Wages Payable	0					0
Taxes Payable	0					0
Rent/Leases-Building	0					0
Rent/Leases-Equipment	0					0
Secured Debt/Adequate Protection Payments	0					\$0.00
Professional Fees	0					0
Amounts Due to Insiders*	0					0
Other: Condo Fees						
Other: Mortgage						
<b>Total Postpetition Debts</b>	<b>0</b>					<b>\$0.00</b>

Explain how and when the Debtor intends to pay any past-due postpetition debts.

\*"Insider" is defined in 11 U.S.C. Section 101(31).

In re Nicholas V. Campanella  
Debtor

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Reporting Period: March, 2017

### DEBTOR QUESTIONNAIRE

Must be completed each month. If the answer to any of the questions is "Yes", provide a detailed explanation of each item. Attach additional sheets if necessary.		Yes	No
1	Have any funds been disbursed from any account other than a debtor in possession account this reporting period?		X
2	Is the Debtor delinquent in the timely filing of any post-petition tax returns?		X
3	Are property insurance, automobile insurance, or other necessary insurance coverages expired or cancelled, or has the debtor received notice of expiration or cancellation of such policies?		X
4	Is the Debtor delinquent in paying any insurance premium payment?		X
5	Have any payments been made on pre-petition liabilities this reporting period?		X
6	Are any post petition State or Federal income taxes past due?		X
7	Are any post petition real estate taxes past due?		X
8	Are any other post petition taxes past due?		X
9	Have any pre-petition taxes been paid during this reporting period?		X
10	Are any amounts owed to post petition creditors delinquent?		X
11	Have any post petition loans been received by the Debtor from any party?		X
12	Is the Debtor delinquent in paying any U.S. Trustee fees?		X
13	Is the Debtor delinquent with any court ordered payments to attorneys or other professionals?		X



P.O. Box 15284  
Wilmington, DE 19850

MARIE T CAMPANELLA  
384 SUNSET BLVD  
WYCKOFF, NJ 07481-2420

## Preferred Rewards

### Customer service information

1.888.888.RWDS (1.888.888.7937)

TDD/TTY users only: 1.800.288.4408

En Español: 1.800.688.6086

bankofamerica.com

Bank of America, N.A.  
P.O. Box 25118  
Tampa, FL 33622-5118

## Your BofA Core Checking Preferred Rewards Platinum Honors

for February 23, 2017 to March 27, 2017

Account number: 0040 9021 1159

**MARIE T CAMPANELLA**

### Account summary

Beginning balance on February 23, 2017	\$9,213.78
Deposits and other additions	25,688.18
Withdrawals and other subtractions	-10,964.58
Checks	-8,359.17
Service fees	-0.00

**Ending balance on March 27, 2017** **\$15,578.21**

Your account has overdraft protection provided by deposit account number  
0040 9020 5922.

Here's a tip

## Sending money is quick and easy

**Use Mobile or Online Banking to send or transfer money:**

- Between your Bank of America® bank accounts
- To and from your accounts at other banks
- To someone else

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## Your checking account

MARIE T CAMPANELLA | Account # 0040 9021 1159 | February 23, 2017 to March 27, 2017

### Deposits and other additions

Date	Description	Amount
03/06/17	BKOFAMERICA MOBILE 03/06 3531451209 DEPOSIT *MOBILE NJ	6,400.00
03/08/17	PILGRIM MEDICAL DES:DIRECT DEP ID:591027567388GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,263.35
03/20/17	BKOFAMERICA MOBILE 03/20 3535933110 DEPOSIT *MOBILE NJ	8,750.00
03/22/17	PILGRIM MEDICAL DES:DIRECT DEP ID:930102395319GH8 INDN:CAMPANELLA,MARIE CO ID:9111111101 PPD	5,274.83

**Total deposits and other additions** **\$25,688.18**

### Withdrawals and other subtractions

Date	Description	Amount
02/23/17	CHASE CREDIT CARDS Bill Payment	-4,000.00
02/28/17	Online scheduled transfer to CHK 2412 Confirmation# 1126797386	-200.00
03/01/17	TFCU/Joseph Alfano Bill Payment	-2,831.02
03/02/17	VERIZON COMMUNICATIONS Bill Payment	-233.76
03/07/17	PAYPAL DES:INST XFER ID:HAWTHORNECO INDN:MARIE CAMPANELLA CO ID:PYPALSI77 WEB	-49.90
03/09/17	PSE&G Bill Payment	-454.86
03/22/17	CHASE CREDIT CARDS Bill Payment	-3,000.00
03/22/17	VERIZON COMMUNICATIONS Bill Payment	-195.04

**Total withdrawals and other subtractions** **-\$10,964.58**

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**Checks**

Date	Check #	Amount
03/02/17	654	-606.38
03/02/17	655	-287.00

Date	Check #	Amount
03/13/17	657*	-7,465.79

<b>Total checks</b>	<b>-\$8,359.17</b>
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<b>Total # of checks</b>	<b>3</b>
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\* There is a gap in sequential check numbers



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- bankofamerica.com
- Bank of America, N.A.  
P.O. Box 25118  
Tampa, FL 33622-5118

## Your Rewards Money Market Sav Preferred Rewards Platinum Honors

for February 23, 2017 to March 27, 2017

Account number: 0040 9020 5922

MARIE T CAMPANELLA

### Account summary

Beginning balance on February 23, 2017	\$88,516.14
Deposits and other additions	7,405.14
Withdrawals and other subtractions	-0.00
Service fees	-0.00
<b>Ending balance on March 27, 2017</b>	<b>\$95,921.28</b>

Annual Percentage Yield Earned this statement period: 0.06%.  
Interest Paid Year To Date: \$14.09.

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## Your savings account

MARIE T CAMPANELLA | Account # 0040 9020 5922 | February 23, 2017 to March 27, 2017

### Deposits and other additions

Date	Description	Amount
02/27/17	BKOFAMERICA MOBILE 02/27 3528852581 DEPOSIT *MOBILE NJ	7,400.00
03/27/17	Interest Earned	5.14
Total deposits and other additions		\$7,405.14

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Nicholas V. Campanella or Marie Campanella

**Profit & Loss**

06/16/17

Accrual Basis

February 23 through March 27, 2017

	Feb 23 - Mar 27, 17
Ordinary Income/Expense	
Income	
Interest Income	5.14
Other Income	22,550.00
Salary - Pilgrim Medical Center	10,538.18
Total Income	33,093.32
Gross Profit	33,093.32
Expense	
Food, Clothing, Hygiene	
Clothing	379.24
Food	994.10
Hygiene	940.00
Total Food, Clothing, Hygiene	2,313.34
Interest Expense	
LOC	606.38
Total Interest Expense	606.38
Meals and Entertainment	386.08
Mortgage - M&T Bank	7,465.79
Rental Expense	200.00
Travel Expense	188.40
Utilities	1,170.66
Total Expense	12,330.65
Net Ordinary Income	20,762.67
Net Income	20,762.67

Company: Pilgrim Medical Group Inc  
1 of 2  
Check dates from: 3/8/2017 - Payroll 1  
Pay Period from: 02/20/2017 to: 03/19/2017  
Date Printed: 06/16/2017 11:27  
22737851 - RZIGH8

## Payroll Details

Hours and Earnings		Taxes		Deductions		Employer	
Description	Hours	Rate	Amount	Tax	Amount	Net Pay	Amount
Total Employees - Company: 1			\$5,461.82				

Company: Pilgrim Medical Group Inc  
 Check dates from: 3/8/2017 - Payroll 1 to: 3/22/2017 - Payroll 1  
 Pay Period from: 02/20/2017 to: 03/19/2017  
 Date Printed: 06/16/2017 11:27  
 22737851 - RZ/GH8